PTC/SB/06 (08-03)

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Approved for use through 7/31/2006, CINB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR (Column 1) (Column 2) SMALL ENTITY FÓR NUMBER FILED **NUMBER EXTRA** RATE FEE RATE FFF (37 CFR 1.16(a)) **OR** TOTAL CLAUMS (37 CFR.1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 OR X S MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN Column 1) OR (Column 2) (Calumn 3) SMALL ENTITY SMALL ENTITY CLAMS HIGHEST REMAINING NUMBER PRÉSENT RATE ADDI-TIONAL RÀTE EN ADOL AFTER PREVIOUSLY EXTRA TIONAL MENDMENT PAID FOR FEE FEE Minus AMENDM ×4.50 OR Independent OF CFR 1,14(b) ×\*.]00 ΩR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) D812+ OR TOTAL TOTAL ADO'L FEE OR ADD'L FEE (Column 1) (Column 3) (Column 2) CLAIMS MIGHEST  $\mathbf{\omega}$ REMAINING PRESENT NUMBER RATE ADDI-TIONAL RATE ADD1 **AFTER** PREVIOUSLY EXTRA TIONAL AMENDMENT 面 PAID FOR FEE FEE Total profit 1,14(d) Minus AMENDM 25 50 OR Independent OF CFR 1.15(cg Minu OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)) OR TOTAL TOTAL ADD1 FFF OR ADD'L FEE (Coturn 1) (Column 2) (Column 3) CLAIMS REMAINING HIGHEST O PRESENT NUMBER RATE ADDS RATE ADDL **AMENDMENT** AFTER PREVIOUSLY **EXTRA** TIONAL TIONAL PAID FOR **AMENDMENT** FFF PEE Total OF OFR 1.15(c) Minus QR Independent Minus 10C 1DeFRST PRESENTATION OF MATPLE DEPONDENT CLAM (07 OFR 1.16(0)) OR

· ATTENDED TO STATE OF THE STAT

If the entry in column 1 is less than the entry in column 2, verile, 10 in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. Instruction of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to tile (and by the USFTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the smouth of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL ADD'L FEE

OR

ADD'T FEE